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Maryland Department of Health and Mental Hygiene

A Message from the Acting Secretary

The annual transition from one calendar year into the next is a time where hopes and dreams start anew. This year is no different, although we are facing a difficult fiscal future. We are entering a year where the State of Maryland is facing large budget deficits that must be addressed.

In an effort to help bring the current fiscal year's budget back into balance, all State agencies have been asked to make significant budget cuts. So far, DHMH has cut \$46.5 million from its \$5 billion Fiscal Year 2003 budget, has been operating under a hiring freeze, and has surrendered over 400 vacant positions. Unfortunately, we are anticipating still more cuts, not only for the current fiscal year, but also for fiscal year 2004 beginning in July.

Our primary goal is to make necessary cuts while minimizing the loss of services to the populations we serve. There is no question that some services have been and will need to be reduced, but we hope to maintain some level of funding for all programs. Then, when better fiscal times return to Maryland, we may be able to restore funding to these programs.

Some services, primarily Medicaid, operate under a mandate, which means a certain level of benefits must be funded by the State. Many other programs receive federal funding which requires an equivalent State match, or "maintenance of efforts." Our goal is to continue to meet these agreements. In fact, whenever possible, we will be looking to maximize federal funds to help make up for lost State funds.

It may be difficult to watch changes in the programs you have nurtured for years. But please keep in mind that we still have the same vision and continue to be dedicated to our mission. No one works harder to make them a reality for Maryland.

Please remember that we truly appreciate your hard

work. The foundation for the programs you helped build will be maintained. Your hard work shines through in the many successes we have seen this past year. Smile as you remember them. I am counting on you to support each other and keep your heads held high!

arline# Stephenson

Thank you.

Stephenson Named Acting Secretary

Governor Glendening has appointed Arlene H. Stephenson as Acting Secretary for DHMH. Ms. Stephenson, who was Deputy Secretary for Public Health Services, will serve in this position until a new Secretary is appointed by Governor-elect Ehrlich.

During this interim period, Dr. Diane Matuszak will serve as Acting Deputy Secretary for Public Health Services. Rich Stringer will become Acting Director for the Community Health Administration, a position he held before Dr. Matuszak was named Director of that Administration in 2001.

New HIV Cases Decline in Northwest Baltimore City

The northwest section of Baltimore City has experienced a 24 percent decline in new HIV cases since 1999, according to research conducted by the AIDS Administration.

This decrease, which began in 2000, reverses a trend that had seen an average 36 percent per year increase in new HIV cases in the region from 1994 through 1999. No other area of Maryland had

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HIV Cases Decline Continued

experienced a statistically significant increase between 1994 and 1999.

The AIDS Administration, in collaboration with several partners — the Baltimore City Health Department, numerous community-based and faith-based organizations, and local colleges and universities, developed a plan to strategically target additional HIV prevention services to the Northwest region of the city.

Under this plan, the AIDS Administration focused resources to enhance several existing communityand faith-based HIV prevention programs that served high-risk populations. Locations and hours of the Baltimore City Needle Exchange Program were expanded to include nights and weekends, periods of high drug use.

Finally, the Red Ribbon Question Mark campaign, designed to encourage pregnant women and young men to get tested for HIV, began in 2000. Focused primarily in the northwest region, the number of tests in the publicly funded HIV Counseling and Testing Services program increased in the region from 7,840 tests per year before the campaign to 13,186 tests per year after the campaign.



A Fond Farewell for Dr. Benjamin

A farewell party was held in early December for Dr. Georges C. Benjamin, who left DHMH to become executive secretary

of the American Public Health Association.

Calendar of Events

Tuesday and Wednesday, January 21 - 22 — **Blood Drive**. O'Conor Building Lobby; 9:30 a.m. — 3:00 p.m. Please contact Angela Mahoney at 410-767-6408 for more information or to schedule an appointment.

Friday, January 24 — Workshop: Boundaries and Dual Relationships in Social Work: Ethical and Risk-Management Issues; University of Maryland School of Nursing Baltimore; 8:30 a.m. — 4:15 p.m. \$120, approved for Category I continuing education credits. Phone 410-706-1839 for more information or visit the school's Web site at www.ssw.umaryland.edu/cpe for a full workshop description.

Pictured above, from the top: Lt. Col. Stephen T. Moyer names Dr. Benjamin an honorary member of the Maryland State Police, complete with trooper's hat and badge; Dr. Benjamin and his wife Yvette enjoy one of emcee Richard Proctor's funny stories; and members of the Marching Drum Corps from the Poly and Western High Schools of Baltimore provide entertainment.

Smart Step Forward Is Testing Its Feet

A group of public and private sector organizations have teamed up to create **Smart Step Forward**, a coalition that emphasizes increased activity levels through changes to developed communities.



Smart Step Forward demonstration projects are planned in four Maryland communities: Bel Air in Harford County, College Park in Prince George's County, Turners Station in Baltimore County, and the Fletchwood community in Cecil County. The grants of \$30,000 each, funded in November by the Robert Wood Johnson Foundation, are designed to promote pedestrian-friendly community design through support studies, planning, outreach, education, and other activities.

These demonstration projects represent a broad spectrum of communities in terms of size, geography, and degree of car-dependence, with the common goal of encouraging more people to choose walking as a form of transportation.

The hope is that, by getting residents to take an active role in analyzing their neighborhoods and finding ways to make them more pedestrian-friendly, the coalition will build a sustained base of support for ongoing change.

The demonstration projects also will begin to lay the groundwork for benchmarking health statistics and measuring improvements related to increased activity levels.

The Smart Step Forward coalition also is working with the National Center for Bicycling and Walking to provide a series of one-day workshops across the State to help communities identify walking habits, barriers and opportunities for walking.

The coalition includes representatives from the Maryland Departments of Health and Mental Hygiene, Planning and Transportation, along with the Governor's Office of Smart Growth, the University of Maryland's National Center for Smart Growth Research and Education, local and private health officials and a broad array of citizens groups.

From the health perspective, Smart Step Forward will help address the connection linking declining activity levels with obesity and preventable chronic conditions such as heart disease and diabetes.

Cardiovascular disease is the number one cause of death in Maryland, with about 14,000 people dying each year and an estimated \$2.25 billion spent on related health-care costs. The State also has the fourth highest prevalence of diabetes in the nation.

For more information about Smart Step Forward, go to *www.smartst epforward.org* or contact Patrick McCracken of the DHMH Division of Cardiovascular Health and Nutrition at 410-767-5483.

Maryland Files Smallpox Plan With CDC

Maryland's pre-event smallpox vaccinations plan, filed with the federal Centers for Disease Control and Prevention (CDC) on December 9, calls for more than 5,000 health care professionals to be vaccinated against smallpox.

The plan, the State's Phase 1 response to the National Smallpox Vaccination Program, calls for the vaccination of approximately 78 local health department teams and two State health department teams totaling about 500 people statewide. Additionally, acute care hospitals across the State will be asked to gather teams of 50 to 250 people for vaccination. This could total approximately 5,500 individuals.

During the coming weeks, DHMH will be working with the local health departments and acute-care hospitals to identify the members of these teams. When the vaccine is released to the states by the CDC, Maryland's team members will be vaccinated.

The goal of Phase 1 of the national plan is to have a prevaccinated health workforce that could implement a larger-scale vaccination effort and provide patient care if an outbreak were to occur.

In addition to Phase I, two other phases comprise the national plan. Phase 2 would expand the offer of vaccination to all health care and public safety workers nationally. Plans for vaccination of the general public would be included in Phase 3.

A plan for the State's response to an actual smallpox event

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Smallpox Plan

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was submitted to the CDC in early December. In addition to the vaccination of health care workers, the plan includes vaccine safety monitoring, outbreak investigation strategies, and care for the first cases and contacts.

More information on smallpox is available on the DHMH Web site at <code>www.edcp.org</code> (click on 'bioterrorism information,' then click on the 'smallpox fact sheet') or on the CDC Web site at <code>www.cdc.gov</code> (click on 'smallpox' in the 'spotlights' box.)

Stay Safe * During Winter Weather

Winter jumped off to an early start in Maryland this year, reminding us that when outdoor temperatures drop significantly below normal, staying warm and safe can be a challenge, even inside your home. But there are a number of steps you can take to help make this— and every —winter safe for you and your loved ones.

The first line of defense is weather awareness. Advance weather forecasts often predict bad weather several days in advance. Listen to the radio or watch local television news regularly. When you know a cold front or a snowstorm is on the way, use the time to get ready.

Staying inside reduces the risk of falls and car accidents, but inadequate heating systems can be an indoor hazard. Use of space heaters and fireplaces to keep warm increases the risk of household fires and carbon monoxide poisoning.

When using a space heater, make sure the room is well-ventilated and the interior door is left open. Place the heater at least three feet away from furniture, draperies or other objects. Never use one to dry clothing, blankets or other flammable items. Keep children and pets away from the heater, and be sure to turn it off and unplug it before leaving the room or going to bed.

Here are more ways to make your home safer in winter weather:

- Have your chimney or flue inspected yearly by a professional.
- Install a smoke detector and a battery-operated carbon monoxide detector on every floor, near any areas where you use space heaters.
- Stock up on non-perishable food items like canned fruits and vegetables, cereal and crackers, as well as bottled water.
- Buy a multi-purpose, dry chemical fire extinguisher, and learn how to use it.
- Create an emergency supply kit stocked with a battery-powered radio, a wind-up or batterypowered clock, extra batteries, flashlights, matches and candles.

Winter weather conditions may also present other more obvious health concerns — especially when you are outside. Remember to dress properly in cold weather — strong winds can multiply the effects of cold temperatures and cause the body to lose heat at a faster rate.

Wear several layers of lightweight clothing and two pairs of socks. Cover your head, ears and lower part of your face to avoid frostbite. Cover your mouth with a scarf to avoid directly inhaling very cold air. Mittens are better than fingered gloves for keeping hands warm. Wear boots with slipresistant treads to help keep you from slipping on ice, and use sunglasses to protect your eyes from winter sun glare.

For some people, shoveling snow can be a dangerous winter activity. If you are not normally physically active, or if you are overweight, don't jump right in — warm up with gentle stretches and a few minutes of walking before you start to shovel.

Take small loads of snow on your shovel. Lift by bending your knees and keeping your back as straight as possible. Keep your arms close to your body when you lift your load. If you can, push snow out of the way instead of lifting it. Take frequent breaks, stand up straight and walk around between shoveling.



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